I. Name of Lobbyist(s)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

RECEIVED

JUL 17 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15) PLEASE PRINT

Mary Kaysen

118 Valley Street	p —p,	n or corporation)			
		Beverly Farms	MA		01915
Business Address: (St	reet)	(Town/City)	(Sta	ite)	(Zip Code)
(978)232-1147	(978) 232-1148	e-mail	mary.kayse	en@bms.com
(Telephone)		(Fax)	• man _		
reportable expense ti 	ansactions which	- file separate reports are not attributable to in the months prior to the	any one client).		
Bristol-Myers So		in the months prior to the	reporting date rei	ative to the to	llowing client:
Distor-Myers 30	<u> </u>	nt as it appears on the Lobb	vist Registration For	m)	···
<u>OR</u>	(an i will of office	a. ii appears on the Looo	, is registration rul	··· <i>y</i>	
All reportable trans unrelated to any partic	actions by the lobb ular client.	yist (including the lobby	ist's family), or the	e lobbying fire	n listed below w
IV. Date of Report	April 25, 2018		July 25, 201		
Reports cover: activi	ity from date of regis		activity from 4/1/18	_	
	October 31, 2018 activity from 7/1/18 t		January 30, activity from 10/1/1		
	no fees received	and no reportable tr	ansactions mad	e since the la	ast report.
lf this box is checked, o	complete just this fo	orm and submit it to the S	ecretary of State S	Office, State	Trouse, Room 20
lf this box is checked, o Concord, NH 03301.	complete just this fo		ecretary of State S	однее, вниг	Trouse, Room 20
lf this box is checked, o Concord, NH 03301. VI. Check if addition	complete just this fo				
If this box is checked, of Concord, NH 03301. VI. Check if addition: ☑ If you have receive	complete just this for al reports are atta ed fees or made exp n honorarium or rei	ched:	Addendum A– Fo	ees and Expen	ses

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Mary Kaysen	<u></u>
II. Name of lobbyist's partnership, firm or corporation, if any: Bristol-Myers Squibb Company	
(Name of partnership, firm or corporation)	
III. Name of Client Bristol-Myers Squibb Company	Date July 12, 2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations service oss fee amount reported shall not b
a) Total of all fees received in this reporting period	a)\$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 400 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm aggregate total of all expenses pair expenses; (b) the aggregate total of a le: meals purchased during a business st than \$10 that is given to the persord with a value of \$25.00 or less); an orting period of greater than \$25.00 for the of greater than \$25, purchase of the expense reimbursement, or political expenses reimbursement reimb
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a)\$_ ^{58.95}
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
N/A	s
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Mary Kay Sen	7/13/18
(Signature of fobbyist)	(Date)
Mary Kaysen (Print Name of lobbyist)	

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	Mary Kaysen		
II. Name of lobbyist's pa	rtnership, firm or cor	poration, if any:	
Bristol-Myers Squ	ibb Company		
•	artnership, firm or corporation)		
III. Name of Client Brist	col-Myers Squibb Con	npany	Date July 12, 2018
Political Contributions For each political contrib client/lobbyist and lobbyi	•		oter 664 paid on behalf of the
Full name of candidate:		House Republicans	
•	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	1000	Office Candidate i	s Seeking House
Full name of candidate:	Senate Republican	Majority PAC	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	1000	Office Candidate is	Seeking Senate
	ntribution on the line above		ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:		(1)	04111 N # 411 N
	(Last Name)	(First Name)	(Middle Name/Initial)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.
Mary hayses (Signature of lobbyist) 7/13/18 (Date)
Mary Kaysen
(Print Name of lobbyist)

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